PART B - FEE(S) TRANSMITTAL

FEB 1 1 2005	his form, together wit		or <u>Fax</u>	(703) 746-4000	or Patents ginia 22313-1450	
INSTRUCTIONS: This feapproducte. All further extra indicated unless corrected to maintenance from notation	fespondence including the libelow or directed otherwise	smitting the ISSU Patent, advance or in Block 1, by (a)	E FEE and PUBL ders and notification) specifying a new	ICATION FEE (if required in of maintenance fees correspondence address	uired). Blocks 1 throug will be mailed to the co s; and/or (b) indicating	th 5 should be completed where urrent correspondence address as a separate "FEE ADDRESS" for
CURRENT CORRESPONDENC	E ADDRESS (Note: Use Block 1 for	any change of address)		Fee(s) Transmittal. T	his certificate cannot be	used for domestic mailings of the used for any other accompanying signment or formal drawing, must ssion.
1650 MEMOREX I	RNATIONAL, INC. DRIVE CA 95050		. • *	I hereby certify that	Ail Stop ISSUE FEE ad PTO (703) 746-4000, or	s being deposited with the United for first class mail in an envelope ddress above, or being facsimile n the date indicated below. (Depositor's name)
02/14/2005 LWONDIM2 00 01 FC:1501 02 FC:1504	1400.00 OP 300.00 OP				THE CHU	(Signature) (Date)
APPLICATION NO.	FILING DATE	FIRST NAMED INV		ENTOR	ATTORNEY DOCKET	NO. CONFIRMATION NO.
10/633,192 TITLE OF INVENTION: CA	07/31/2003 ABLE END CONNECTOR	ASSEMBLY HAV	Yun Long Ko			3167
APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE	PUBLICATION FEE	TOTAL FEE(S) DU	E DATE DUE
nonprovisional	NO	\$2000 \$1,400,00		\$300	**************************************	0.00
EXAMINER		ART UNIT		CLASS-SUBCLASS		
DINH, PHUONG K		2839		439-483000		
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN	an assignee is identified be 37 CFR 3.11. Completion	clow, no assignee of this form is NO	data will appear or	n the patent. If an assis		, the document has been filed for
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Please check the appropriate	assignee category or catego	ries (will not be pr	inted on the patent)	: 🗖 Individual 🕏	Corporation or other private	vate group entity Government
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Issue Fee ★ A check in the amount of the fee(s) is enclosed. Image: A check in the amount of the fee(s) is enclosed. Image: A check in the amount of the fee(s) is enclosed. Image: A check in the amount of the fee(s) is enclosed. Image: A check in the amount of the fee(s) is enclosed. Image: A check in the amount of the fee(s) is enclosed. Image: A check in the amount of the fee(s) is enclosed.						
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			• •	_		application identified above. nt; or the assignee or other party in
Authorized Signature				Date	X1220	NJ
Typed or printed name _	(M 175 1 2)	UNG		Registratio	•	
Alexandria, Virginia 22313-	on is required by 37 CFR 1.3 ity is governed by 35 U.S.C pplication form to the USPTs for reducing this burden, slinia 22313-1450. DO NOT 1450.	1./ -				file (and by the USPTO to process) ncluding gathering, preparing, and nt of time you require to complete S. Department of Commerce, P.O. ssioner for Patents, P.O. Box 1450, control number.